Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE

SUMMARY SHEET

Change in Company's	premium or rate level p	roduced by rate revision effective _	October 1, 2010
(1) <u>Cover</u> a	ge	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
1. Automobile Liabilit	y Private		
Passenger Co			
2. Automobile Physic Private Passer	al Damage		
3. Liability Other Tha	n Auto		
4. Burglary and Theft	·		
5. Glass			
6. Fidelity			
7. Surety			
Boiler and Machine	ery		
9. Fire			
10. Extended Coverag	e	****	
11. Inland Marine			
12. Homeowners			
13. Commercial Multi-	Perii		
14. Crop Hail15. Other <u>Trade Pro</u>	Droporty	\$4,866	-8.9% (Estimated)
	Insurance	ψ 4 ,000	-0.5 /6 (Estimated)
+.			
Does filing only apply t	o certain territory (territ	ories) or certain classes? If so, spec	ify: <u>No</u>
Brief description of filin CF-2007-RLA1, CF-20	g. (If filing follows rates 008-RLA1, CF-2009-RL	of an advisory organization, specify .A1 / Adjusting Loss Cost Multiplier /	organization): Adopting ISO Filings Adding Age of Building Factors
*Adjusted to reflect all **Change in Company		will result from application of new rate	tes.
		i.e. A	een Ingurence Company
		Addi	son Insurance Company Name of Company
			reame or company
		Chris Mander	s, Corporate Underwriting Analyst
			Official – Title

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or ra	ate level produced by rate revision
effective 07/13/2010	

-	(1)	(2) Annual Premium	(3) Percent
1.	Coverage Automobile Liability Private	Volume (Illinois) *	Change (+or-) **
Ι.	Passenger		
	Commercial		
2	Automobile Physical Damag		
۷.	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto		
3. 4.	Burglary and Theft		
5.	Glass		
5. 6.	Fidelity		
7.	Surety		
3.	Boiler and Machinery		
).) .	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
13. 14.	Crop Hail		
1 4 . 15.	Other Mobile Homeowners	\$600.240 (astimate)	.0.50/ (
IJ.	Life of Insurance	\$692,319 (estimate)	+8.5% (estimate)
	Life of insurance		
	Does filing only apply to certai	n territory (territories) or o	certain
	Classes? If so,		
	specify: No No		
	Brief description of filing. (If fil	ing follows rates of an ac	lvisory
	Organization, specify		
	organization):		Discount for ages 55-64. Inc.
	PC Rels, Other Structures rates, an		
	Modifying tied down requirements for		st
	*Adjusted to reflect all prior rat		
	**Change in Company's premi	um level which will result	trom application of new
	rates.	Auto Oumana Inguis	anaa Cammanu
		Auto-Owners Insura	
			ne of Company gr, Personal Property Actuarial
			official – Title
			miciai – Tiue

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 12/01/2010 new 02/01/2011 renewal.

-	(1)	(2) Annual Premium	(3) Percent
-	Coverage -	Volume (Illinois) * _	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage	777	
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Commercial Package	\$6,469,230	+0.2
	Life of Insurance	40,100,200	
•			
	Does filing only apply to certain	in territory (territories) or	certain
	Classes? If so,		
	specify: NO NO		······································
	Brief description of filing. (If fi	ling follows rates of an ac	dvisory
	Organization, specify		
	organization):	ISO COMMERCIAL PROP	ERTY LOSS COSTS ML-2010-RLA1
	*Adjusted to reflect all prior ra		
	**Change in Company's prem	ium level which will result	t from application of new
	rates.	0 " 11 1 " 0	N
		Capitol Indemnity C	
			ne of Company
		Amanda Mullen, Pro	
		C	Official – Title

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective <u>08/23/2010</u>.

<u>.</u> -	(1) Coverage	(2) Annual Premium Volume (Illinois) *	(3) Percent Change (+or-) **
1.	Automobile Liability Private	veidino (ininiolo)	
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		•
	Commercial		-
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Earthquake	\$0	0%
	Life of Insurance		
•	Does filing only apply to certai	n territory (territories) or	certain
	Classes? If so,		
	specify: This filin	g is applicable to all territorie	S
	Brief description of filing. (If fil	ing follows rates of an a	dvisory
	Organization, specify		
	organization):		all current customers with
	Earthquake coverage to a 15% eart		
	Earthquake coverage to have at lea	ast a 15% earthquake deduct	tible.
	*Adjusted to reflect all prior rat **Change in Company's premi		It from application of new
	rates.		
		The First Liberty In	surance Corporation
			me of Company
			dustry Filings Analyst
		(Official - Title

Home

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective $\frac{11}{12010}$ New; $\frac{1}{12011}$ Renewals .

	(1)	(2)	(3)
		Annual Premium	Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
			
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other FARMOWNERS	\$161,672	+3.0%
	Line of Inquirance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify Affects all territories; various loss cost multipliers and rates are being revised.

Brief description of filing. (If filing follows rates of an advisory organization, list organization) Revised loss cost multipliers applicable to A.A.I.S. loss costs (see Exhibit 1). Also, revised rates for horse and buggy liability, farm machinery open peril and minimum policy premiums.

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

Goodville Mutual Casualty Company

Name of Company

Brian Frankhouser, Actuarial Analyst
Official - Title

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 08/23/2010 ______.

-	(1)	(2) Annual Premium	(3) Percent
-	Coverage -	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12 .	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Earthquake	\$33,834	-12.3%
	Life of Insurance		
•	5 60		a and a tra
	Does filing only apply to certa	in territory (territories) or	cenain
	Classes? If so,	filing applies to all territories.	
	specify: No this	illing applies to all territories.	
	Brief description of filing. (If fi Organization, specify organization):		dvisory all current customers with
	Earthquake coverage to a 15% ear		
	Earthquake coverage to have at le		
	*Adjusted to reflect all prior ra **Change in Company's prem	te changes.	
	rates.	Liberty Insurance	Corporation
			me of Company
			dustry Filings Analyst
			Official - Title

Home

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or ra	te level produced by rate revision
effective 08/23/2010	•

-	(1)	(2) Annual Premium	(3) Percent
4	Coverage -	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger Commercial		
2			
2	Automobile Physical Damag		•
	Private Passenger Commercial		
3.	Liability Other Than Auto		
3. 4.	Burglary and Theft		
- . 5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Earthquake	\$171,592	-12.7%
	Life of Insurance		
•			
	Does filing only apply to certai	n territory (territories) or	certain
	Classes? If so,	ia ampliante de all tamitaria	_
	specify: This filin	g is applicable to all territories	5.
	D : 6 4 in A' 6 5 in (16 5 ii		A
	Brief description of filing. (If fil Organization, specify	ling follows rates of an ac	avisory
	organization):	This filing will increase	all current customers with
	Earthquake coverage to a 15% earth		
	Earthquake coverage to have at le		
	*Adjusted to reflect all prior rate		
	**Change in Company's prem		t from application of new
	rates.		
		Liberty Mutual Fire	Insurance Company
			ne of Company
			dustry Filings Analyst
			Official – Title

Home

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective 10/15/2010 .

-	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois) *	Change (+or-) **
	Automobile Liability Private		
	Passenger		0.0
	Commercial		0.0
	Automobile Physical Damag		
	Private Passenger		0.0
	Commercial		0.0
	Liability Other Than Auto		0.0
	Burglary and Theft		0.0
	Glass		0.0
	Fidelity		0.0
	Surety		0.0
	Boiler and Machinery		0.0
,	Fire		0.0
0.	Extended Coverage		0.0
1.	Inland Marine		0.0
2.	Homeowners		0.0
3.	Commercial Multi-Peril		0.0
4.	Crop Hail		0.0
5.	Other Farm Umbrella	\$32,287	0.6%
	Life of Insurance		
•	Does filing only apply to certa Classes? If so,		
	specify: Filing a	pplies to the entire state of III	linois and all classes.
	Brief description of filing. (If the Organization, specify organization):		advisory mit factors and minimum premiums
	in a rate increase.		
	*Adjusted to reflect all prior ra **Change in Company's pren		ult from application of new

rates.

Meridian Citizens Mutual

Name of Company Kris Kirby - Product Specialist II

Official - Title

FORM (RF-3)

SUMMARY SHEET

Change in Company's premium or ra	ite level produced by rate revision
effective 9/1/2010	

	······································	' 	
-	(1)	(2) Annual Premium	(3) Percent
	Coverage -	Volume (Illinois) *	Change (+or-) **
1.	Automobile Liability Private		
	Passenger		
	Commercial		
2	Automobile Physical Damag		
	Private Passenger		•
	Commercial		
3.	Liability Other Than Auto		
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners	see below for the EQ coverage	portion of our HO policy
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other Earthquake coverage only	\$17,296	+7.0%
	Life of Insurance		
•			
	Does filing only apply to certa Classes? If so,	in territory (territories) or	certain
	•	sion applies only to those policie	es with earthquake coverage
	(Approximately 75 of 270 total policies.)	sion applies only to those policie	our anquaric coverage.
	· · · · · · · · · · · · · · · · · · ·	ilina followa ratao of an a	dvison
	Brief description of filing. (If fi	ning follows rates of an a	uvisory
	Organization, specify organization):	The AAIS corthquake revi	sion includes rating precedures
	,		sion includes rating procedures,
	territorial definitions, rating factors and lo	iss cost revisions. We are implem	enting this revision in its entirety.
	*Adjusted to reflect all prior re	to changes	
	*Adjusted to reflect all prior ra **Change in Company's prem		It from application of new
	rates.	HOTH IEVEL WITHOU WITH IESU	it nom application of new
	iaics.	Pharmaciete Mutus	al Insurance Company
		า กลากลบอเอาพนเนต	ar mourance company

Pharmacists Mutual Insurance Company
Name of Company
Tom Claude, VP Underwriting/Risk Management
Official – Title

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective _		October 1, 2010	
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>	
Automobile Liability Private			
Passenger Commercial	- towns		
Automobile Physical Damage Private Passenger Commercial _			
3. Liability Other Than Auto			
4. Burglary and Theft			
5. Glass			
6. Fidelity			
7. Surety _			
8. Boiler and Machinery			
9. Fire			
10. Extended Coverage			
11. Inland Marine			
12. Homeowners			
13. Commercial Multi-Peril			
14. Crop Hail	* 05.000	-8.9% (Estimated)	
15. Other <u>Trade Pro - Property</u> Line of Insurance	\$65,890	-8.9% (Estimated)	
Line of insurance			
Does filing only apply to certain territory (t	erritories) or certain classes? If so, specify:	No	
Brief description of filing. (If filing follows r CF-2007-RLA1, CF-2008-RLA1, CF-2008	ates of an advisory organization, specify or 9-RLA1 / Adjusting Loss Cost Multiplier / Ac	ganization): <u>Adopting ISO Filings</u> Iding Age of Building Factors	
		· · · · · · · · · · · · · · · · · · ·	
*Adjusted to reflect all prior rate changes. **Change in Company's premium level when the company's premium level when the change is a second company of the change in the change is a second company of the chang	nich will result from application of new rates		
		re & Casualty Company	
		Name of Company	
	Chris Manders	Corporate Underwriting Analyst	
		Official – Title	

Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate le	evel produced by rate revision effective	09/01/2010
(1)	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
<u>Coverage</u>	volume (illinois)	Change (+ or -)
Automobile Liability Private		
Passenger Commercial		
Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		
Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery		
9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail	1,370,726	-1.3%
15. Other Vehicle Service Cotnracts Line of Insurance	1,370,726	-1.376
Does filing only apply to certain territory	(territories) or certain classes? If so, specif	y:
Brief description of filing. (If filing follows	rates of an advisory organization, specify of	organization):
Having completed the annual review of	our vehicle service contract reimbursemen	t program, we wish to file the attached
	bursement policy on file in your state. The	policy provides insurance coverage for
the repair obligations incurred by the ins	ured.	
*A diversal to unfloat all union anto alcourse		
*Adjusted to reflect all prior rate changes		
Change in Company's premium level v	which will result from application of new rate	. 5.
	Universal Un	derwriters Insurance Company
	Oniversal On	Name of Company
	Your	adollo
		Official – Title